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PTO/SB/068 (07-05)

Substitute for Form 1449B/PTO				Complete If Known	
INFORMATION DISCLOSURE STATEMENT BY APPLICANT				Application Number	09/992,235
				Filing Date	11/06/2001
				First Named Inventor	Lederman
				Art Unit	1614
				Examiner Name	Belacrolx Muirhead
Sheet	:	of		Attorney Docket Number	

NON-PATENT LITERATURE DOCUMENTS

Examiner Initials*	Cite No. ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T ²
CDM	A	SALVESEN et al., Arzneimittel	
		Forschung (Drug Research), 1974,	
		24: 137-140	

Examiner Signature	/Cybille Delacroix Muirheid/	Date Considered	06/19/2006
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*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

1 Applicant's unique citation designation number (optional). **2** Applicant is to place a check mark here if English language Translation is attached.

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